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NEW YORK,	NY 10281		ART UNIT	PAPER NUMBER	
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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

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Application No. Applicant(s) 10/607.623 DANENBERG ET AL. Office Action Summary Examiner Art Unit Donna Jagoe 1614 -- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --Period for Reply A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) OR THIRTY (30) DAYS. WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION. Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication. If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication - Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b). Status 1) Responsive to communication(s) filed on 01 May 2009. 2a) ☐ This action is FINAL. 2b) This action is non-final. 3) Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under Ex parte Quayle, 1935 C.D. 11, 453 O.G. 213. Disposition of Claims 4)\(\times\) Claim(s) 1.4-10.16.17.19.20.23-26.31-35.39-41.71 and 72 is/are pending in the application. 4a) Of the above claim(s) is/are withdrawn from consideration. 5) Claim(s) _____ is/are allowed. 6) Claim(s) 1,4-10,16,17,19,20,23-26,31-35,39-41,71 and 72 is/are rejected. 7) Claim(s) _____ is/are objected to. 8) Claim(s) _____ are subject to restriction and/or election requirement. Application Papers 9) The specification is objected to by the Examiner. 10) The drawing(s) filed on is/are; a) accepted or b) objected to by the Examiner. Applicant may not request that any objection to the drawing(s) be held in abevance. See 37 CFR 1.85(a). Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d). 11) The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152. Priority under 35 U.S.C. § 119 12) Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f). a) All b) Some * c) None of: Certified copies of the priority documents have been received. 2. Certified copies of the priority documents have been received in Application No. Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)). * See the attached detailed Office action for a list of the certified copies not received. Attachment(s) 1) Notice of References Cited (PTO-892) 4) Interview Summary (PTO-413) Paper No(s)/Mail Date. Notice of Draftsparson's Catent Drawing Review (CTO-948)

Information Disclosure Statement(s) (PTO/SB/08)
 Paper No(s)/Mail Date 6/5/09.

5) Notice of Informal Patent Application

6) Other:

Art Unit: 1614

DETAILED ACTION

Continued Examination Under 37 CFR 1.114

A request for continued examination under 37 CFR 1.114, including the fee set forth in 37 CFR 1.17(e), was filed in this application after final rejection. Since this application is eligible for continued examination under 37 CFR 1.114, and the fee set forth in 37 CFR 1.17(e) has been timely paid, the finality of the previous Office action has been withdrawn pursuant to 37 CFR 1.114. Applicant's submission filed on May 1, 2009 has been entered.

Claims 1, 4-10, 16, 17, 19, 20, 23-26, 31-35, 39-41, 71 and 72 are pending in this application.

Applicants' arguments filed May 1, 2009 have been fully considered but they are not deemed to be persuasive. Rejections and/or objections not reiterated from previous office actions are hereby withdrawn. The following rejections and/or objections are either reiterated or newly applied. They constitute the complete set presently being applied to the instant application.

Claim Rejections - 35 USC § 112 first paragraph

The following is a quotation of the first paragraph of 35 U.S.C. 112:

The specification shall contain a written description of the invention, and of the manner and process of making and using it, in such full, clear, concise, and exact terms as to enable any person skilled in the art to which it pertains, or with which it is most nearly connected, to make and use the same and shall set forth the best mode contemplated by the inventor of carrying out his invention.

Art Unit: 1614

Claims 1, 4-10, 16, 17, 19, 20, 23, 24, 35, 39-41, 71 and 72 are rejected under 35 U.S.C. 112, first paragraph, as failing to comply with the written description requirement. The claim(s) contains subject matter which was not described in the specification in such a way as to reasonably convey to one skilled in the relevant art that the inventor(s), at the time the application was filed, had possession of the claimed invention. Claims 1, 40 and 71 recite "an inhibitory agent encapsulated within a suitable carrier". The instant specification recites that the agent must be an agent that is an intra-cellular inhibitor of specifically macrophages/monocytes and inhibits and/or destroys the macrophages and/or monocytes (paragraphs 10-13, 19, 20, 24, 25, 28 and 29).

The above disclosures, however, do not provide adequate support for claims drawn to "an inhibitory agent".

Written Description

An applicant shows possession of the claimed invention by describing the claimed invention with all of its limitations using such descriptive means as words, structures, figures, diagrams and formula that fully set forth the claimed invention.

*Lockwood v. American Airlines, Inc., 41 USPQ2d 1961, 1966 (Fed. Cir. 1997). The Examiner is guided in his opinion that Applicant has not adequately described the presently claimed subject matter by the MPEP at § 2163 - 2163.05. In particular, while Applicant's specification as originally filed contained a disclosure drawn to agents that intra-cellular inhibitor of specifically macrophages/monocytes and inhibits and/or destroys the macrophages and/or monocytes (detailed supra), such does not entitle

Art Unit: 1614

Applicants to now claim "an agent" because such represents medicaments that were not previously set forth or that would have been immediately envisaged by one skilled in the art from the specification as originally filed. "A lack of adequate written description issue also arises if the knowledge and level of skill in the art would not permit one skilled in the art to immediately envisage the product claimed from the disclosed process. See, e.g., Fujikawa v. Wattanasin, 93 F.3d 1559, 1571, 39 USPQ2d 1895, 1905 (Fed. Cir. 1996)"(emphasis added), see MPEP § 2163(I)(A). Also, "See also In re Smith. 458 F.2d 1389, 1395, 173 USPQ 679, 683 (CCPA 1972) ("Whatever may be the viability of an inductive-deductive approach to arriving at a claimed subgenus, it cannot be said that such a subgenus is necessarily described by a genus encompassing it and a species upon which it reads." (emphasis added)).", see MPEP § 2163.05(II).

Considering the teachings provided in the specification as originally filed, the Examiner finds that Applicants have failed to provide the necessary teachings, by describing the claimed invention with all of its limitations using such descriptive means as words, structures, figures, diagrams and formula that fully set for the claimed invention, in such a way as to reasonably convey to one skilled in the relevant art that Applicants had possession of the concept of "an inhibitory agent".

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the

Art Unit: 1614

invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

The factual inquiries set forth in *Graham* v. *John Deere Co.*, 383 U.S. 1, 148 USPQ 459 (1966), that are applied for establishing a background for determining obviousness under 35 U.S.C. 103(a) are summarized as follows:

- Determining the scope and contents of the prior art.
- Ascertaining the differences between the prior art and the claims at issue.
- Resolving the level of ordinary skill in the pertinent art.
- 4. Considering objective evidence present in the application indicating obviousness or nonobviousness.

This application currently names joint inventors. In considering patentability of the claims under 35 U.S.C. 103(a), the examiner presumes that the subject matter of the various claims was commonly owned at the time any inventions covered therein were made absent any evidence to the contrary. Applicant is advised of the obligation under 37 CFR 1.56 to point out the inventor and invention dates of each claim that was not commonly owned at the time a later invention was made in order for the examiner to consider the applicability of 35 U.S.C. 103(c) and potential 35 U.S.C. 102(e), (f) or (g) prior art under 35 U.S.C. 103(a).

Claims 1, 4-10, 16, 17, 19, 20, 23-26, 31-35, 39-41, 71 and 72 rejected under 35 U.S.C. 103(a) as being unpatentable over Pennanen et al. (U) and Hack et al. U.S. Patent No. 6,090,777 in view of Ylitalo, Gen. Pharmacology. 2002 and Hope et al. U.S. Patent No. 6,139,871 A.

Pennanen et al. teach that when bisphosphonates are encapsulated in liposomes, the inhibitory potency against proinflammatory cytokines (IL-1β, IL-6 and TNF-α) is enhanced by a factor of 10-20. The complex formation of bisphosphonates

Art Unit: 1614

with extracellular calcium enhanced the **uptake** of the compounds (uptake is also known as phagocytosis)(see abstract). The inhibition of inflammatory cytokine production and secretion **by macrophages** is a valuable marker for potential anti-inflammatory drugs (page 916, column 2). Liposome encapsulated clodronate was over ten times more potent inhibitor of cytokine secretion from RAW264 cells than free drug and the inhibitory potency of etidronate was also considerably increased (page 917, column 2).

It does not teach treatment of a patient having a myocardial infarction (MI).

Hack et al. teach that the inflammatory reaction which occurs in the course of an acute myocardial infarction (AMI) comprises some important events: including the production of cytokines such and tumor necrosis factor α (TNF-α) and interleukin-6 and activation of complement (column 1, lines 56-63) and inhibition of this complement would reduce or prevent myocardial damage (zone of infarct) (column 5, lines 6-18). It would have been made obvious to one of ordinary skill in art at the time it was made to administer the liposome encapsulated bisphosphonates of Pennanen et al. motivated by the teaching that the inhibitory potency against proinflammatory cytokines (IL-1β, IL-6 and TNF-α) is enhanced by a factor of 10-20 when bisphosphonates are encapsulated in liposomes and further motivated by the teaching of Hack et al. who teach that the zone of infarct can be reduced by inhibiting the activation of complement (paragraph 5, lines 6-18), by administration of an agent that has anti-inflammatory properties and is a cytokine antagonist (claims 19 and 21) (Pennanen et al. teaches that bisphosphonates are anti-inflammatory agents that inhibit cytokine production and secretion).

Art Unit: 1614

Ylitalo teaches liposomal (encapsulated) formulations of bisphosphonates such as clodronate and etidronate (page 293, column 2, paragraph 3), and teach that bisphosphonates inhibit atherosclerosis (page 287, column 1 to page 288, column 2). Ylitalo teaches that bisphosphonates anti-atherogenic effect is due to a direct effect on arterial wall wherein the bisphosphonates interact with the subendothelial lipid phagocyting cells (intracellular inhibitor)(page 292, column 1, paragraph 1) and macrophages are especially sensitive to bisphosphonates, and bisphosphonates suppress macrophages and exert cytotoxicity and suppress the appearance of macrophages in arterial wall during atherogenesis. Ylitalo does not teach depletion of macrophages, however, it teaches that the appearance of macrophages is suppressed. Since the term "depletion" is synonymous with the term "eliminating all macrophages" and both circumscribe methods of treatment having absolute success. Absolute success is not reasonably possible with most diseases, especially ones having etiologies as complex as atherosclerosis and AMI.

Pennanen et al., Hack et al. and Ylitalo et al. do not teach the size of the liposomes.

Hope et al. teach liposomes of 0.1 to 0.15 microns for treatment of atherosclerosis (see abstract). It would have been made obvious to one of ordinary skill in art at the time it was made to treat AMI in a patient by administering encapsulated bisphosphonates in liposomes in a size of 0.1 to 1 micron motivated by the teaching of Pennanen et al. who teach that liposomal bisphosphonates are 10-20 times more potent in inhibiting proinflammatory cytokines and the teaching of Hack et al. who teach that by

Art Unit: 1614

inhibiting proinflammatory cytokines, formation of complement is inhibited and thus the zone of infarction is reduced. Regarding the size of the liposome, instant claims 1, 25 and 71 is drawn to a formulation with a size range of 0.03-1 micron. Hope et al. teach a liposome formulation in a range of from 0.1 to 0.15 microns. This amount overlaps and encompasses the claimed size. A *prima facie* case of obviousness exists where the claimed ranges are close enough that one skilled in the art would have expected them to have the same properties.

Double Patenting

The nonstatutory double patenting rejection is based on a judicially created doctrine grounded in public policy (a policy reflected in the statute) so as to prevent the unjustified or improper timewise extension of the "right to exclude" granted by a patent and to prevent possible harassment by multiple assignees. A nonstatutory obviousness-type double patenting rejection is appropriate where the conflicting claims are not identical, but at least one examined application claim is not patentably distinct from the reference claim(s) because the examined application claim is either anticipated by, or would have been obvious over, the reference claim(s). See, e.g., In re Berg, 140 F.3d 1428, 46 USPQ2d 1226 (Fed. Cir. 1998); In re Goodman, 11 F.3d 1046, 29 USPQ2d 2010 (Fed. Cir. 1993); In re Longi, 759 F.2d 887, 225 USPQ 645 (Fed. Cir. 1985); In re Van Ornum, 686 F.2d 937, 214 USPQ 761 (CCPA 1982); In re Vogel, 422 F.2d 438, 164 USPQ 619 (CCPA 1970); and In re Thorington, 418 F.2d 528, 163 USPQ 644 (CCPA 1969).

A timely filed terminal disclaimer in compliance with 37 CFR 1.321(c) or 1.321(d) may be used to overcome an actual or provisional rejection based on a nonstatutory double patenting ground provided the conflicting application or patent either is shown to be commonly owned with this application, or claims an invention made as a result of activities undertaken within the scope of a joint research agreement.

Effective January 1, 1994, a registered attorney or agent of record may sign a terminal disclaimer. A terminal disclaimer signed by the assignee must fully comply with 37 CFR 3.73(b).

Art Unit: 1614

Claims 1, 4-10, 16, 17, 19, 20, 23-26, 31-35, 39-41, 71 and 72 are provisionally rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1-12 of copending Application No. 10/871488.

Although the conflicting claims are not identical, they are not patentably distinct from each other because the instant and conflicting claims recite substantially the same subject matter, differing only in the description of the particular components claimed. For instance, conflicting claim 1 requires the method of treating an acute coronary syndrome with is inclusive of an acute myocardial infarction of the instant claims. It would have been obvious to anyone of ordinary skill in the art that the claims overlapped in scope in this manner. One skilled in the art would have been motivated to have interpreted the claims as broadly as is reasonable, and in doing so recognize that they are coextensive in scope and thus the proper subject of an obviousness-type double patenting rejection as outlined by *In re Vogel*, 422 F.2d 438, 164 USPQ 619 (CCPA 1970).

This is a <u>provisional</u> obviousness-type double patenting rejection because the conflicting claims have not in fact been patented.

Claims 1, 4-10, 16, 17, 19, 20, 23-26, 31-35, 39-41, 71 and 72 are provisionally rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1, 4-10, 17-20, 23, 24, 27-29, 32-36, 38 and 41 of copending Application No. 11/190787. Although the conflicting claims are not identical, they are not patentably distinct from each other because the instant and conflicting claims recite

Art Unit: 1614

substantially the same subject matter, differing only in the description of the particular components claimed. For instance, conflicting claim 1 requires the method of treating an ischemia-reperfusion injury with is inclusive of the acute myocardial infarction of the instant claims as indicated in conflicting claim 23. It would have been obvious to anyone of ordinary skill in the art that the claims overlapped in scope in this manner. One skilled in the art would have been motivated to have interpreted the claims as broadly as is reasonable, and in doing so recognize that they are coextensive in scope and thus the proper subject of an obviousness-type double patenting rejection as outlined by *In re Vogel*, 422 F.2d 438, 164 USPQ 619 (CCPA 1970).

This is a <u>provisional</u> obviousness-type double patenting rejection because the conflicting claims have not in fact been patented.

Thus the claims fail to patentably distinguish over the state of the art as represented by the cited references.

Accordingly, for the above reasons, the claims are deemed properly rejected and none are allowed.

Response to Arguments

Regarding the rejection of daims 1, 4-10, 16, 17, 19, 20, 23-26, 31-35, 39-41, 71 and 72 under 35 U.S.C. 103(a) as being unpatentable over Pennanen et al. (U) and Hack et al. U.S. Patent No. 6,090,777 in view of Ylitalo, Gen. Pharmacology. 2002 and Hope et al. U.S. Patent No. 6,139,871, Applicant asserts that Pennanen describes an *in vitro* study wherein liposome-bisphosphonates inhibited the secretion of proinflammatory cytokines, such ad IL-18. IL-6 and TNF-α from the RAW 264 cell line

Art Unit: 1614

and further asserts that Pennanen fails t teach or suggest a method of treating a patient having an acute myocardial infarction. In response to applicant's arguments against the references individually, one cannot show nonobviousness by attacking references individually where the rejections are based on combinations of references. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981); *In re Merck & Co.*, 800 F.2d 1091, 231 USPQ 375 (Fed. Cir. 1986). Further, *in vitro* results are indicative of *in vivo* results, and since there is a reasonable expectation of success from *in vitro* data. "Tests evidencing pharmacological activity may manifest a practical utility even though they may not establish a specific therapeutic use." Nelson, 626 F.2d at 856. "Successful *in vitro* testing will marshal resources and direct the expenditure of effort to further *in vivo* testing of the most potent compounds, thereby providing an immediate benefit to the public, analogous to the benefit provided by the showing of an *in vivo* utility. *Cross*, 753 F.2d at 1050 (citations omitted).

Absent surprising unexpected results, one would have been motivated to employ bisphosphonate liposomes for a patient afflicted with a myocardial infarction by administering encapsulated bisphosphonates in liposomes in a size of 0.1 to 1 micron motivated by the teaching of Pennanen et al. who teach that liposomal bisphosphonates are 10-20 times more potent in inhibiting proinflammatory cytokines and the teaching of Hack et al. who teach that by inhibiting proinflammatory cytokines, formation of complement is inhibited and thus the zone of infarction is reduced. Regarding the size of the liposome, instant claims 1, 25 and 71 is drawn to a formulation with a size range of 0.03-1 micron. Hope et al. teach a liposome formulation in a range of from 0.1 to

Art Unit: 1614

0.15 microns. This amount overlaps and encompasses the claimed size. In response to applicant's argument that the examiner's conclusion of obviousness is based upon improper hindsight reasoning, it must be recognized that any judgment on obviousness is in a sense necessarily a reconstruction based upon hindsight reasoning. But so long as it takes into account only knowledge which was within the level of ordinary skill at the time the claimed invention was made, and does not include knowledge gleaned only from the applicant's disclosure, such a reconstruction is proper. See *In re McLaughlin*, 443 F.2d 1392, 170 USPQ 209 (CCPA 1971).

Regarding the Hack et al. reference, again Applicant is engaging in a piecemeal analysis of the references when the rejections are based on combinations of references. See *In re Keller*, 642 F.2d 413, 208 USPQ 871 (CCPA 1981); *In re Merck & Co.*, 800 F.2d 1091, 231 USPQ 375 (Fed. Cir. 1986). Hack et al. teach that the inflammatory reaction which occurs in the course of an acute myocardial infarction (AMI) comprises some important events: including the production of cytokines such and tumor necrosis factor α (TNF-α) and interleukin-6 and activation of complement (column 1, lines 56-63) and inhibition of this complement would reduce or prevent myocardial damage (zone of infarct) (column 5, lines 6-18). In holding an invention obvious in view of a combination of references, there must be some suggestion, motivation or teaching in the prior art that would have led a person of ordinary skill in the art to select the references and combine them in the way that would produce the claimed invention. This motivation may flow from the prior art references themselves, the knowledge of one of ordinary skill in the art, or, in some cases, from the nature of the problem to be solved. Here, filtered

Art Unit: 1614

through the knowledge of one skilled in the art, Hack disclosed that an inflammatory reaction occurs in the course of an acute myocardial infarction (AMI) and comprises some important events: including the production of cytokines such and tumor necrosis factor α (TNF-α) and interleukin-6 (IL-6) and activation of complement (column 1, lines 56-63) and inhibition of this complement would reduce or prevent myocardial damage (zone of infarct) (column 5, lines 6-18). Pennanen et al. teach that when bisphosphonates are encapsulated in liposomes, the inhibitory potency against proinflammatory cytokines (IL-1β, IL-6 and TNF-α) is enhanced by a factor of 10-20. The complex formation of bisphosphonates with extracellular calcium enhanced the uptake of the compounds (uptake is also known as phagocytosis) (see abstract). The inhibition of inflammatory cytokine production and secretion by macrophages is a valuable marker for potential anti-inflammatory drugs (page 916, column 2). Ylitalo teaches liposomal (encapsulated) formulations of bisphosphonates such as clodronate and etidronate (page 293, column 2, paragraph 3), and teach that bisphosphonates inhibit atherosclerosis (page 287, column 1 to page 288, column 2). Ylitalo teaches that bisphosphonates anti-atherogenic effect is due to a direct effect on arterial wall wherein the bisphosphonates interact with the subendothelial lipid phagocyting cells (intracellular inhibitor)(page 292, column 1, paragraph 1) and macrophages are especially sensitive to bisphosphonates, and bisphosphonates suppress macrophages and exert cytotoxicity and suppress the appearance of macrophages in arterial wall during atherogenesis, and Hope et al. teach liposomes of 0.1 to 0.15 microns for treatment of atherosclerosis (see abstract). It would have been made obvious to one of ordinary skill

Art Unit: 1614

in art at the time it was made to treat AMI in a patient by administering encapsulated bisphosphonates in liposomes in a size of 0.1 to 1 micron motivated by the teaching of Pennanen et al. who teach that liposomal bisphosphonates are 10-20 times more potent in inhibiting proinflammatory cytokines and the teaching of Hack et al. who teach that by inhibiting proinflammatory cytokines, formation of complement is inhibited and thus the zone of infarction is reduced. Regarding the size of the liposome, instant claims 1, 25 and 71 is drawn to a formulation with a size range of 0.03-1 micron. Hope et al. teach a liposome formulation in a range of from 0.1 to 0.15 microns. In other words, Hack teaches that the zone of infarct can be reduced by inhibiting the formation of complement, and inhibiting proinflammatory cytokines. Pennanen et al. teach that bisphosphonates encapsulated in liposomes inhibit proinflammatory cytokines and by encapsulating them in liposomes, they become 10-20 times more potent. One having ordinary skill in the art at the time the invention was made would be motivated to employ liposomal bisphosphonates to reduce the zone of infarct from a myocardial infarction from the teachings of Heck and Pennanen et al. Hope et al. provides further motivation to employ the size of the liposome because it teaches that liposomes in sizes from 0.1 to 0.15 microns for treatment of atherosclerosis (see abstract). Ylitalo is cited for the teaching that bisphosphonates anti-atherogenic effect is due to a direct effect on arterial wall wherein the bisphosphonates interact with the subendothelial lipid phagocyting cells (intracellular inhibitor) (page 292, column 1, paragraph 1) and macrophages are especially sensitive to bisphosphonates, and bisphosphonates suppress macrophages and exert cytotoxicity and suppress the appearance of macrophages in arterial wall

Art Unit: 1614

during atherogenesis. Applicant asserts that chronic diseases require treatments that must be tolerated over long periods of time but acute disease conditions require quick and sometimes extreme treatments and one skilled in the art would not look to treatments for long term progressive diseases for treatments of acute situations. In response, Hack et al. teach that the inflammatory reaction which occurs in the course of an acute myocardial infarction (AMI) comprises some important events: including the production of cytokines such and tumor necrosis factor α (TNF-α) and interleukin-6 and activation of complement (column 1, lines 56-63) and inhibition of this complement would reduce or prevent myocardial damage (zone of infarct) (column 5, lines 6-18) and Pennanen satisfies these requirements because it teaches that liposome encapsulated bisphosphonates have an inhibitory potency against proinflammatory cytokines (IL-1β, IL-6 and TNF-α) that is enhanced by a factor of 10-20 when bisphosphonates are encapsulated in liposomes.

Correspondence

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Donna Jagoe whose telephone number is (571) 272-0576. The examiner can normally be reached on Monday through Friday from 8:00 A.M. - 4:30 P.M..

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Ardin Marschel can be reached on (571) 272-0718. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Art Unit: 1614

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

Donna Jagoe /D. J./ Examiner Art Unit 1614

June 3, 2009

/Ardin Marschel/ Supervisory Patent Examiner, Art Unit 1614